



# CASH AND VOUCHER ASSISTANCE IN MIGRATION CONTEXT VOICES OF MIGRANTS IN NIGER

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# ACKNOWLEDGEMENTS

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Words and editing: Alexander Brown.

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*Cover photo: Survey with internally displaced persons fleeing attacks by armed groups on the Niger-Mali border. Daressalam, Niger. August 2021. Credit: Niger Red Cross Society.*

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## CONTEXT: MIGRATION IN NIGER AND THE HUMANITARIAN RESPONSE

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The human migration situation in Niger is complex. The country is simultaneously a point of origin, transit and destination for international movement, as well as displaying internal displacement. In 2019, according to the International Organization for Migration (IOM), some 170,000 migrants entered Niger and 200,000 left.<sup>1</sup>

Armed groups in the north of neighbouring Mali frequently carry out violent attacks against the local civilian population, causing them to flee and seek refugee status in Niger. The same armed groups also venture into Niger itself, making people leave their homes and seek humanitarian assistance away from the border region of Tillabéry.

Niger is also a focal point for many migration routes originating throughout sub-Saharan Africa for people making the perilous journey northwards towards the Mediterranean crossing to Europe. In many cases, Niger is the last place where migrants might interact with any humanitarian organizations before attempting to cross the Sahara into coastal countries.

Meanwhile, Niger is ranked 189th on the United Nations Development Programme (UNDP) Human Development Index, with 91 per cent of its population experiencing multidimensional poverty.<sup>2</sup> There is, therefore, a great need for international humanitarian response in Niger to assist and support the many people belonging to various migrant profiles.

One potential modality that could prove effective in Niger is cash and voucher assistance (CVA), which is an increasingly common form of humanitarian aid around the world. For instance, the International Federation of Red Cross and Red Crescent Societies (IFRC) is seeking to distribute 50 per cent of its aid in CVA form by 2025. Indeed, CVA presents several advantages over other assistance modalities. For example, recipients can make their own decisions about how the cash can be spent on their immediate needs, which can vary according to individual scenarios.

## SURVEY DETAILS

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On 24–31 August 2021, the Niger Red Cross, supported by the IFRC, conducted a survey with 35 migrants to ask about their views on CVA.



*Survey with a migrant in transit through Niger, Niamey airport, August 2021.*

The sites visited were all in neighbourhoods around the capital city of Niamey:

- Kouaratagui and Tchangarey (sites where internally displaced people (IDPs) have gathered)
- Gamkalley (transit migrants from western Africa)
- Daressalam (camp for refugees from the Kidal area in northern Mali)
- Pays-Bas (transit migrants and returnees)
- hospital (refugees seeking medical treatment)
- airport

The survey consisted of 23, mostly multiple-choice or yes/no questions, and was conducted by trained volunteers working in pairs under supervision from Niger Red Cross and IFRC staff.

1 IOM. [Niger: Facts and Figures](#).

2 UNDP. [Human Development Report: Niger](#)

# SURVEY RESULTS

## Question 1: Migrant profile

Among the respondents, there were:

- eight refugees,
- seven internally displaced people (IDPs),
- 20 migrants with other profiles. These other profiles included migrants in transit and returnees.

## Questions 2 & 3: Gender and age

Fourteen of the respondents were women, while 21 were men.

The participant age distribution is given in Figure 1. Most participants were under 50 years old.

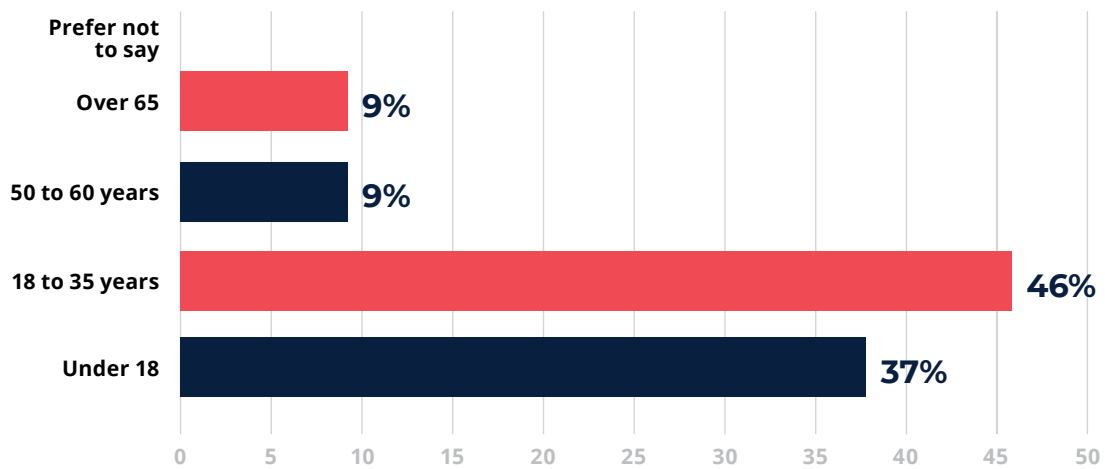


Fig 1: Age

## Question 4: CVA definition

Respondents were asked: "According to you, what is cash and voucher assistance?"<sup>3</sup> The answer options and numbers of responses were:

- "Assistance provided in cash to vulnerable communities by humanitarian organizations or by authorities." (21)
- "To receive money in return for favours." (6)
- Other (8)

This shows that most of the interviewees had a correct understanding of CVA and its objectives.

## Question 5: Previous CVA methods witnessed

The next question was "What methods of CVA distribution have you seen?". The percentage responses are shown in Figure 2, with cash in hand and vouchers being the modalities most commonly seen.

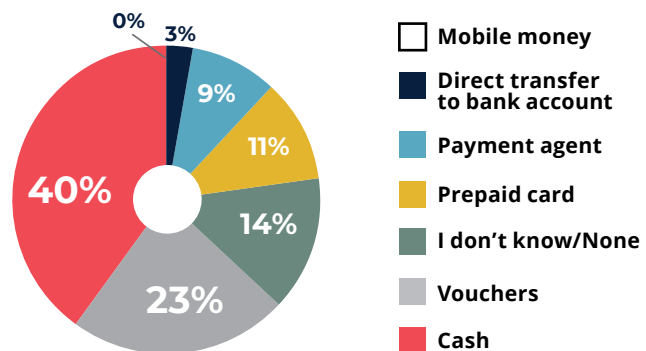


Fig. 2: What methods of CVA distribution have you seen?

3 The survey was conducted in French. The questions, answer options and respondent quotes given here have been translated.

## Question 6: Previous CVA received

The responses to the question “Have you ever received CVA? If so, through what method?” are shown in Figure 3, with 62 per cent of respondents having received CVA in the past.<sup>4</sup>

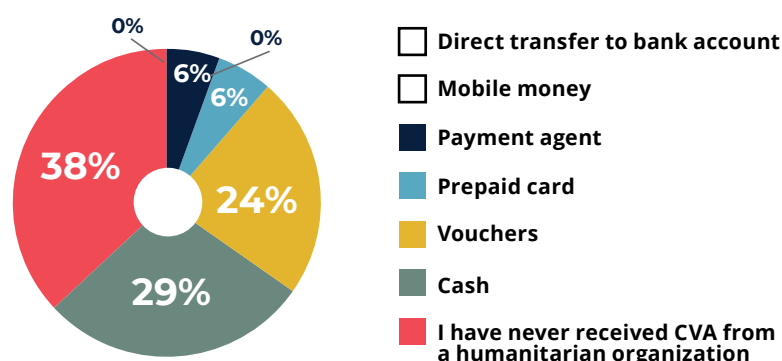


Fig. 3: Have you ever received CVA? If so, through what method?

## Question 7: Migration journey stage when receiving CVA

The next survey item was “If you answered ‘Yes’ to Question 6, where were you in your migratory journey when you received CVA?”, with the 23<sup>5</sup> responses fairly equally distributed as follows:

- In transit/on the move (7)
- At the point of origin (6)
- Settled/in camp (5)
- On return (5)

## Questions 8 & 9: Identity documents required for receiving CVA and their possession

To the question “If you answered ‘Yes’ to Question 6, did you have to present an identity document? If so, what type of document?”, participants responded as shown in Figure 4, with close to 50 per cent stating that they had not needed to present their identity document.

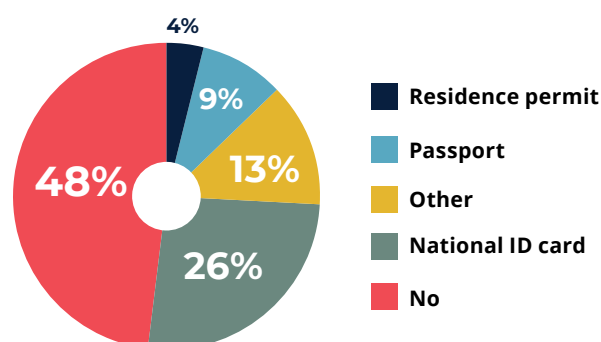


Fig. 4: Did you need to present ID to receive CVA?

Of the 12 participants who had been asked for documents, nine said they had had them, while the remaining three had not. The three respondents who had not been in possession of the identity documents asked of them to receive CVA were asked an open question about what had occurred in their cases. Two reported receiving the CVA after being registered by name (one also mentioned being given a card at this point), while the third did not answer as he left in a hurry (see footnote 4).

4 Question 6, like many subsequent questions, only has 34 responses instead of 35. This is because one respondent had to leave quickly mid-survey. In other cases, a question (e.g., question 7) was only asked where relevant (i.e., in cases where the previous question was answered a certain way).  
5 Only 22 respondents indicated having received CVA in Question 6. This discrepancy might be explained by a respondent answering either Question 6 or Question 7 incorrectly.

## Question 10: Fear of unauthorised data access

Thirty-four respondents answered the question “Are you afraid of your data or location being accessed without your consent?”, with 30 saying “no” and four saying “yes”. When asked to clarify why they were (or were not) afraid of their data or location being accessed without their consent, participants’ responses included:

*I am not afraid of my data or location being accessed without my consent because...*

*“I keep in touch with my family at home anyway and tell them where I am” – Male migrant aged 18–35*

*“Because the Red Cross helps you regardless of where you’re from.” – Male IDP aged 18–35*

*I am afraid of my data or location being accessed without my consent because...*

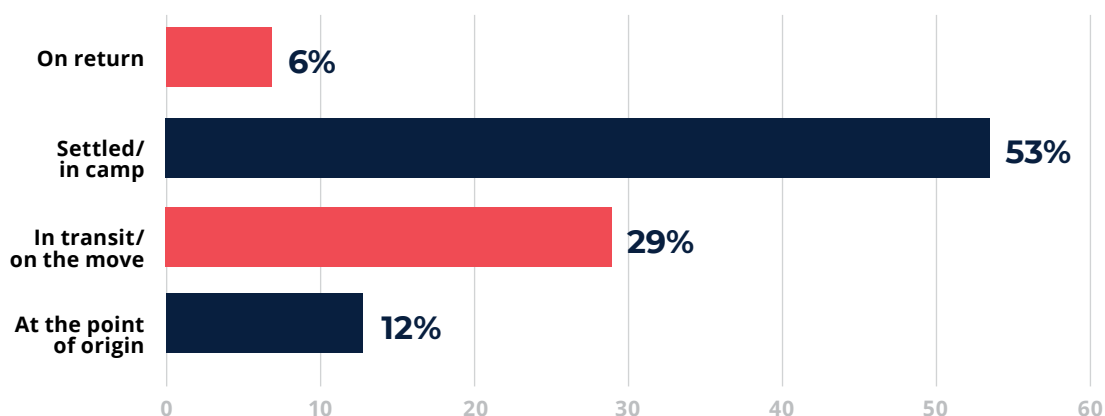
*“The most important thing for me is to receive assistance” – Male IDP aged 18–35*

*“I don’t want other families to know where I am because I have not sent them anything”  
– Male migrant aged 35–50*

## Question 11: Preferred migration journey stage to receive CVA

As opposed to Question 7, which asked about when participants had actually received CVA in the past, this question asked about migrants’ preferences regarding the stage of the journey when they might receive CVA in the future. The responses (Figure 5) were:

- Settled/in camp (18)
- In transit/on the move (10)
- At the point of origin (4)
- On return (2)



*Fig. 5: Where in your journey would you prefer to receive CVA?*

The interviewers felt that the response to this question broadly represented the respondents’ migratory stage at the time of the survey, and that each responded based on their particular, immediate interest. Given the varied profile of migrants in Niger, it is of interest to note the clear preference of 53 per cent of respondents for CVA to be received while they are settled or in camps.

## Questions 12 & 13: Advantages and disadvantages of CVA

Participants were asked for their views on the benefits and drawbacks of CVA.

Positive aspects cited included:

*"CVA enables us to start a revenue-generating activity, pay for healthcare, preserve family dignity." – Male IDP aged 18–35*

*"CVA improves my resilience" – Male refugee aged 35–50*

*"This assistance helped me buy food and meet my family's immediate needs." – Male migrant aged 35–50*

Negative aspects highlighted included:

*"The CVA process can take a long time" – Female migrant aged 35–50*

*"There is a risk of being robbed by bandits" – several respondents gave an answer to this effect.*

## Question 14: Use of CVA (hypothetically) received

When asked how they had used or might use CVA, respondents gave answers including, by decreasing order of frequency:

- to buy food
- to satisfy immediate needs
- to buy clothing
- to pay for shelter
- to pay for healthcare
- to invest in revenue-generating activities
- to fund my migration journey

## Question 15: Preference for conditional or unconditional CVA

Respondents were asked whether they would prefer to receive conditional or unconditional CVA. Sixteen indicated conditional, thirteen unconditional. When asked to explain their answers, those preferring conditional CVA cited (Figure 6), among others:

*"To know how best to use the assistance." – Female refugee aged 18–35*

*"We receive training in how to use this assistance." – Male migrant aged 18–35*

By contrast, those favouring unconditional CVA mentioned the following:

*"People themselves know best what they need." – Female IDP aged 18–35*

*"We have many different needs." – Male migrant aged 35–50*

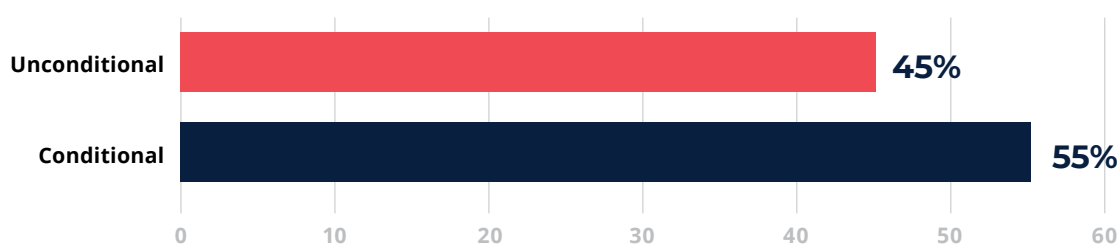


Fig. 6 Would you prefer conditional or unconditional CVA?



The majority preference for conditional CVA could be partially explained by cultural views on expenditure within the household, whereby conditioned expenditure might support better decision making and less waste. This could also reflect the trust that migrants have in the humanitarian organizations that support them through CVA, in that those organizations will seek to support them in the best way possible. Finally, it is also possible that respondents wished to provide the answer they felt would be viewed most favourably by the interviewers.

## Questions 16: CVA recipient selection criteria

Participants who had either witnessed or received CVA were asked “Has someone explained to you why certain people receive CVA and others do not?”. Roughly two thirds of respondents reported having not received such an explanation, while only the remaining third said they had, despite a total of 62 per cent of respondents having received CVA in the past. When asked to recall the explanation, the latter group frequently cited the degree of vulnerability being the main criterion. This result also demonstrates that there is a need to reinforce messages to affected populations as to the selection criteria for CVA recipients.

## Question 17: Preferred method to receive CVA

By contrast with Question 6 on past methods by which participants had received CVA, participants reported their preferred method to receive CVA in the future as shown in Figure 7, with an overwhelming majority preferring to receive cash in hand.

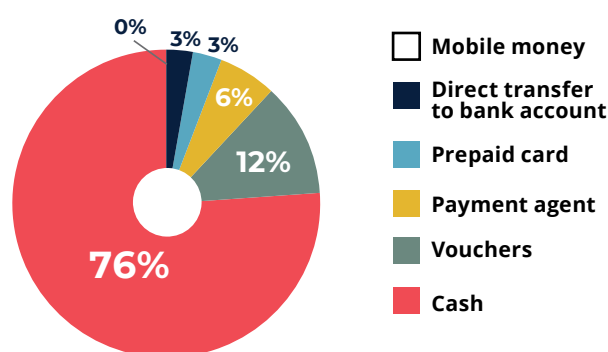


Fig. 7: How would you prefer to receive CVA?

## Question 18: Digital technology in CVA distribution

Respondents who reported having previously received CVA were asked whether digital technology had been used in the process (e.g., to register them for the programme or in the distribution itself). Thirteen said “yes” and eight said “no”. Those replying in the affirmative were then asked what risks they perceived in the use of such technology. Most said they perceived no risks and that they trusted the Red Cross in this case; two respondents perceived a risk associated with “use of data” (presumably “misuse”).

## Question 19: Trust in digital identities

When asked whether they would trust a digital identity solution to access humanitarian services, the majority of respondents (31) said “yes”, while three said “no”. When asked why, those who replied positively said, among others:

*“Better identification and data management” – Female migrant aged 35–50*

*“It’s a modern tool that identifies us quickly.” – Female migrant aged 35–50*

*“Because I trust humanitarian organizations” – Female refugee aged 18–35*

On the other hand, grounds for mistrust included:

*"I don't know anything about digital ID" – Female IDP aged 18–35*

*"It's not easy to access because I'm not confident with it" – Female refugee aged over 65*

## **Question 20: Usefulness of digital identities**

Next, respondents were asked whether they thought digital identities to access and ensure continuity of humanitarian services would be useful. Here, 32 answered favourably and two said they would not find such a solution useful.

## **Question 21: Inconvenience of repeated registration**

In response to the question "Do you think it is too inconvenient to have to register at each humanitarian service point each time you want to access a new service?", six respondents agreed and 28 disagreed.

## **Question 22: Usefulness of digital identities to store credentials**

Twenty-nine respondents agreed it would be useful to store documents such as certificates in a digital identity solution, while five did not.

## **Question 23: Effectiveness of CVA for local integration**

The survey's final question concerned migrants' opinions about the effectiveness of CVA to help them integrate into the local environment. Respondents almost unanimously mentioned CVA being useful for them to invest in revenue-generating activities, while a few also cited the assistance meaning they would not have to resort to begging.

# **CONCLUSIONS**

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Considering the responses to the questions above in combination with the observations made by the Niger Red Cross volunteers during the survey delivery process leads to the following conclusions:

1. Among migrants in Niger, there is a slight preference for conditional cash over other methods of CVA delivery (Questions 15 & 17) and a strong preference for CVA over other forms of assistance. The former result is notable as it bucks the trend found in other situations whereby migrants and other people who receive CVA tend to prefer unconditional assistance.
2. While migrants have mainly received CVA when in transit or at their point of origin (Question 7), they would prefer to receive it once settled or in camp (Question 11).
3. Migrants trust the Niger Red Cross and other IFRC National Societies (noted by volunteers in conversation with the survey participants and inferred from open question responses).
4. As opposed to refugees, internally displaced people in Niger largely have not received CVA (correlation analysis of individual responses).
5. Although many migrants perceive the usefulness of CVA as a means of integration in the local environment through investment in revenue-generating activities (Question 23), in practice, the assistance is primarily spent on immediate needs such as food, clothing, healthcare and shelter (Question 14).

Overall, these findings support the trend observed in other contexts that CVA is perceived positively by members of affected communities, including migrants. Humanitarian actors, including the IFRC, should therefore continue to pursue CVA as a modality of assistance for vulnerable migrants in Niger, adapting to the market and particular context where necessary.

# **THE FUNDAMENTAL PRINCIPLES OF THE INTERNATIONAL RED CROSS AND RED CRESCENT MOVEMENT**

## **Humanity**

The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

## **Impartiality**

It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

## **Neutrality**

In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

## **Independence**

The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

## **Voluntary service**

It is a voluntary relief movement not prompted in any manner by desire for gain.

## **Unity**

There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

## **Universality**

The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.



**The International Federation of Red Cross and Red Crescent Societies (IFRC)** is the world's largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 14 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

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